



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

First Named Inventor	Debra Kay Frider	
Appln. No.	10/716,383	
Filed	November 18, 2003	Group Art Unit: Unknown
Title	Dental Evacuation Mirror	Examiner: Unknown

**DECLARATION FOR UTILITY PATENT APPLICATION**  
(37 C.F.R. § 1.63)

As a below named inventor, I hereby declare that my mailing address and citizenship are as stated below.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

**Dental Evacuation Mirror**

the specification of which:

☐ is attached hereto OR

☒ was filed on November 18, 2003 as United States Application Number 10/716,383 or PCT International Application Number and amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information known to me that is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

PLEASE DIRECT ALL CORRESPONDENCE TO:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

<b>Sole or First Inventor:</b>			
Given Name (First and middle)		Family Name or Surname	
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Inventor's Signature	<i>Debra Kay Frider</i>		Date: 2-20-04
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Inventor's Signature	<i>Paula Ann Wilson</i>		Date: 2.24.04
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